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CONFIRMATION NO. 6406

<b>SERIAL NUMBER</b> 10/500,522	<b>FILING OR 371(c) DATE</b> 04/06/2005 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b>	
<b>APPLICANTS</b> Norbert Heske, Kottgeisering, GERMANY; Thomas Heske, Grafrath, GERMANY;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/DE03/00844 03/17/2003					
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 202 04 363.0 03/19/2002 GERMANY 202 04 362.2 03/19/2002 GERMANY 202 04 361.4 03/19/2002 GERMANY 102 12 156.7 03/19/2002 GERMANY 102 12 139.7 03/19/2002 GERMANY 102 12 155.9 03/19/2002 GERMANY 202 09 525.8 06/19/2002 GERMANY 202 09 530.4 06/19/2002 GERMANY 202 11 934.3 08/02/2002 GERMANY 202 15 962.0 10/17/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 48	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> AIR MAIL NORBERT HESKE DORFSTRABE 22A KOTTGEISERING, 82288 GERMANY					
<b>TITLE</b> Vacuum biopsy device					
<b>FILING FEE RECEIVED</b> 1554	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )		